U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 **LABOR ORGANIZATION OFFICER AND** EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U - 5

3. Name and address of person filing.

MN.

State

Name Thomas V Arnold

Street 11376 Elling wood Ave. N. W.

Silver Creek

P.O. Box, Bldg., Room No., if any Box 42

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 / 1 / 2004 Through: 12 / 31 / 2004

4. Name, file number, and address of labor organization.

Name I.S. E. W. LOCAL 160

P.O. Box, Building and Room Number, if any 25 22

Street 2522 Marshall St. N.E.

on 8-2-05 612-781-3126

Labor Organization File Number 023532

minneapolis

	21P Code + 4 5 5 4/8
5. Position in labor organization. Business Repre	Santative.
Enter appropriate data below If, during the past fiscal year, you or your spo	
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization.	derived income or other economic benefit of ion represents or is actively seeking to represent.
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name XCEL ENERGY	a meal for myself.
Trade Name, if any: N/M .	a meal for myself.
P.O. Box, Bldg., Room No., if any 414 No cullet Mall	7.b. Amount.
Street 414 Nicollet Mall	
City Minneapolis	19.00
State M.N. ZIP Code + 4 55401	
Sian	ature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the

undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Name of Person Filing	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name	a. Labor Organization	
Trade Name, if any:	b. Trust	
P.O. Box, Bldg., Room No., if any	c. Empløyer	
Street		
City		
State ZIP Code + 4		
10. If 9.b. or 9.c. is checked give trust or employers name.	11.a. Nature of such dealing.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street	11.b. Approximate dollar value of such dealing.	
City State ZIP Code/+ 4	12.a. Nature of interest held or income received.	
State ZIP Code/+ 4		
7	12.b. Amount.	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	



Transactions detailed in this form represent my good faith effort to reconstruct reportable transactions for the period from 1/1/04 to 12/31/04. Complete records of reportable transactions were not kept for that period, and some items may have been unintentionally omitted. If, in the future, it comes to my attention that there are transactions that should have been reported, I will promptly file an amended Form LM-30.

Thomas V. Cold.

3-2-05